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To: Members of the Therapist Category, USPHS

From: CAPT. Charles L. McGarvey, Chief Professional Officer

Subject: CPO Vision and Goals

Change of leadership in any organization often results in curiosity of members about the vision and goals of the new leadership. The following information is offered to all therapist officers as my personal perspective for the Therapist category and future strategic goals.

My vision for the Therapist Category will be to advance the 200-year mission of the Commissioned Corps of the USPHS beyond the well-being and health and welfare of its nation's citizens. The nation and its people have undergone significant change in the last century. Where disease had once been random and non-exclusive in its widespread destruction, it now can be manufactured and used offensively as a tool of warfare. Where malnutrition and poor hygiene was identified as a root cause of many illnesses, now abuse and overindulgence have promoted unhealthy lifestyle and addictive behaviors. In his book *Plagues and Politics*, Dr. Fitzhugh Mullan provided an extensive account of the Public Health Service's efforts in eradicating a variety of diseases and threats to the country. The book illustrated the worth and importance of the original PHS mission, and introduced the concept of new threats to our nation from such diseases as HIV/AIDS which combined both viral and behavioral factors in promoting spread of the disease.

Our country and its citizens are currently facing a series of serious threats to longevity and quality of life. Many potential resolutions to these threats will require education, enlightenment and instruction of our citizens in promoting health lifestyles and positive changes in personal behavior. Reduction of alcohol consumption, smoking and promotion of balanced, prudent diets combined with daily exercise will be essential to reducing the threat to health and well being of our nation. In addition to the adverse effects of unhealthy behaviors, many citizens remain fearful and vulnerable to the threat of random acts of violence and bio-terrorism. As such there appears to be a need to develop mechanisms of triage, defense and response. I can envision no better group of individuals than the Therapist category and the Commissioned Corps of the U.S. Public Health Service along with other uniformed services to meet such a mission.

In 1999, the Therapist category volunteered to spearhead an effort to engage its own officers in a program of health lifestyles and fitness. Today, as a result of that effort many officers have adopted better nutrition, exercise and stress management behaviors in order to not only improve their own lifestyles but also to lead others by example....an essential element of leadership in any progressive and outcome-oriented organization. Obesity among American people is also a major

public health issue for clinicians and researchers these days. The statistics regarding this epidemic are staggering and have been implicated as the root cause for a number of metabolic and cardiovascular diseases in our country. This is perhaps an area where the TPAC can join with nutritionists and dieticians to develop or support new initiatives and programs endorsed by the Surgeon General.

Many therapists have also volunteered to participate in the Disaster Medical Assistance Teams (DMAT) and the Commissioned Corps Readiness Force (CCRF) in support of disaster relief. Most recently the National Health Service Corps has developed a new group to professions referred to as Ready Responders to react in cases of national disaster. My vision of the future is that all newly recruited officers would be required to meet a standard of fitness, training and health lifestyle in order to remain a commissioned officer in the PHS. Also, that each officer would be trained to serve in any disaster activity, domestic or international, if called upon by the needs of the nation. Currently many senior Therapist officers possess the clinical competencies and skills necessary to serve as first line providers in the assessment of acute musculoskeletal and trauma conditions. Mobilization of this group to supplement emergency medicine on the field would be another category goal to support the SG's goal of readiness. The President of the United States recently instructed the OSG that CCRF membership should represent 30% of the CC by the end of 2003, 50% by the end of 2004, and 70% by the end of 2005. The therapist category presently has 47 therapists listed on the CCRF roster, 44 of which are deployable. We have met the first goal for 2003, but will need approximately 20 more therapists enrolled in CCRF by 2004, and 20 more enrolled by 2005 in order to meet the 70% level established by the President. I would encourage each therapist in the category to visit the following website (<http://oep.osophs.dhhs.gov/ccrf/>) to apply for the CCRF. As Commissioned officers in the USPHS we may be deployed at any time for any reason regardless of membership in CCRF, therefore our efforts to join the CCRF reflect our commitment and support to the OSG in meeting the President's goal. The Therapist (34%) category is third only to Nursing (37%) and Dietician (41%) categories in meeting 2003 goals. Let's take the lead on this and be the first to the top, if not exceed the President's expectations!

My primary goal as CPO will be to respond to the immediate needs and agenda of the Office of the Surgeon General and provide advice and support for the Therapist Professional Advisory Committee and the Therapist category as a whole. Given these turbulent times, the need to react quickly and effectively to any given threat will require a thorough knowledge of the capability and availability of the Therapist category. Also essential to an immediate response will be effective communication with our other uniformed services. As such I will work closely with the TPAC to create an inventory of all the therapists, their unit locations, special knowledge, skills and talents and their relative availability to be mobilized in time of emergency. Second, I intend to promote inter-service communication and coordination among other service advisors (Army, Navy, Air Force) to advance the capabilities during emergencies involving national defense as proclaimed by the President and defined by the Memorandum of Agreement signed between HHS and DoD signed in 1989. Other goals related to our nation's health which we may pursue may be referenced in *Healthy People 2010*.

Last, but certainly not least, I would **strongly** encourage all therapist officers to honor the expectations of our surgeon General in wearing the PHS uniform on a daily basis as per his comments published in the Commissioned Corps Bulletin, September 2002:

"Let me outline some of my **expectations** for every Corps officer:

.... Each officer will be visible as an officer when on duty. As a 'uniformed service,' wearing of the uniform **daily** by each and every officer is the standard, not the exception."

Ref: Carmona R: Surgeon General's Column. Commissioned Corps Bulletin. Vol 16: No. 9 September 2002.

Imagine, if you will, what a great thing it would be for the category to report to the OSG that every therapist officer wears their uniform on a daily basis. This might be one of those few advantages in being a small but effective category. Be forewarned, this will be one of the questions that I will ask therapist officers when discussing their work in the field.

In closing, I would be remiss not to acknowledge the significant efforts and accomplishments of my predecessor, CAPT Charlotte Richards, "Char" to most of you. As most of you are aware, she not only worked diligently with the OSG and TPAC during her tenure in support of the PHS and category but agreed to extend her term by another year in order to facilitate the selection of the next CPO. All of us in the category owe her a debt of gratitude for her exemplary service, guidance and leadership. If you haven't already...I would encourage all therapists to send her a short e-mail of thanks as a small token of appreciation. Another individual that deserves recognition is CDR Jeff Fultz and his equally significant and impressive efforts in advancing the category. A true leader and visionary person, his actions and activities served the TPAC very well. There are many others in the TPAC and category that deserve recognition for their support of the category and I thank them for such dedication.

I look forward to working with CDR Nancy Balash, TPAC Chair, the TPAC membership and all therapists in the category over the next 4 years. As "Char" has expressed to me recently, our new Surgeon General and world-wide events provide new and exciting and challenges for the Commissioned Corps and our category. Personally, I couldn't think of a better group of professionals to step up to the challenge. I respectfully ask for your strong and unselfish support in working with me and the TPAC in meeting these new needs and challenges. Additionally, I would invite each and everyone of you to make any suggestions for new initiatives or programs or recommendations of how we might improve our current category, I will be calling on a number of you personally over the next few years to assist in the accomplishment of a number of new initiatives and programs...with your help I believe the Therapist Category will continue to be recognized as a dedicated and highly skilled cadre of professionals. Thank you for the opportunity and honor to serve as your CPO, I look forward to meeting and working with each of you.

Charlie